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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	it 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Sandra First name Dee Middle name Blunt Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4685	

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Debtor 1 Sandra Dee Blunt

		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.		☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)		Business name(s)
		EINs	-	EINs
5.	Where you live	17805 Ridgewood Drive		If Debtor 2 lives at a different address:
		Hazel Crest, IL 60429 Number, Street, City, State & ZIP Code	-	Number, Street, City, State & ZIP Code
		Cook		
		County	County	
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.	
		Number, P.O. Box, Street, City, State & ZIP Code	-	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:		Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Sandra Dee Blunt

ar	Tell the Court About	Your B	ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Requi</i> page 1 and check the app		Individuals Filing for Bankruptcy	
	choosing to file under	■ Cl	■ Chapter 7					
		☐ Cl	hapter 11					
		☐ CI	hapter 12					
		☐ CI	hapter 13					
3.	How you will pay the fee		about how yo	u may pay. Typ attorney is subr	ically, if you are paying the	e fee yourself, you may pay wit	in your local court for more details th cash, cashier's check, or money bay with a credit card or check with	
					allments. If you choose the s (Official Form 103A).	nis option, sign and attach the	Application for Individuals to Pay	
							or Chapter 7. By law, a judge may, 150% of the official poverty line that	
			applies to you	ur family size an	id you are unable to pay th		noose this option, you must fill out	
			по друговис	nn to mave the c	mapler 7 Tilling Fee Walve	or (Omeian Form 100b) and me	it with your polition.	
D. Have you filed for No bankruptcy within the).						
	last 8 years?	☐ Ye	es.					
			District		When	Case nu	mber	
			District		When	Case nu	mber	
			District		When	Case nu	mber	
10.	Are any bankruptcy	■ No	<u> </u>					
	cases pending or being filed by a spouse who is	☐ Ye						
	not filing this case with you, or by a business partner, or by an affiliate?	— те	55.					
			Debtor			Relationsh	hip to you	
			District		When	Case num	nber, if known	
			Debtor			Relationsh	hip to you	
			District		When	Case num	nber, if known	
11.	Do you rent your residence?	■ No	Go to l	ne 12.				
		☐ Ye	es. Has yo	ur landlord obta	nined an eviction judgment	against you and do you want	to stay in your residence?	
				No. Go to line	12.			
				Yes. Fill out Initial bankruptcy pet		viction Judgment Against You	(Form 101A) and file it with this	

Document Page 4 of 62 Case number (if known) Sandra Dee Blunt Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

INO.	

Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Sandra Dee Blunt

5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Case number (if known)

Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Sandra Dee Blunt		Document	Cas	se number (if known)	
Part	6: Answer These Quest	ions for Re	porting Purposes			
16.	What kind of debts do you have?	16a.	Are your debts primarily consundividual primarily for a personal,	mer debts? Consumer debts family, or household purpose	s are defined in 11 e."	U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
			Are your debts primarily busine money for a business or investme			
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you owe the	nat are not consumer debts of	r business debts	
17.	Are you filing under Chapter 7?	□ No.	am not filing under Chapter 7. G	o to line 18.		
	Do you estimate that after any exempt property is excluded and		am filing under Chapter 7. Do yo are paid that funds will be availab			cluded and administrative expenses
	administrative expenses are paid that funds will		No			
	be available for distribution to unsecured creditors?		□ Yes			
18.		■ 1-49		□ 1,000-5,000		25,001-50,000
	you estimate that you owe?	☐ 50-99		5001-10,000		50,001-100,000
		☐ 100-199 ☐ 200-999		□ 10,001-25,000	Ц	More than100,000
19.	How much do you	□ \$0 - \$5	0,000	□ \$1,000,001 - \$10 million	n 🗆	\$500,000,001 - \$1 billion
	estimate your assets to be worth?		1 - \$100,000	□ \$10,000,001 - \$50 million	on \square	\$1,000,000,001 - \$10 billion
			01 - \$500,000	□ \$50,000,001 - \$100 mill □ \$100,000,001 - \$500 mi		\$10,000,000,001 - \$50 billion More than \$50 billion
		□ \$500,00	01 - \$1 million	- \$100,000,001 - \$500 IIII	IIIIOII L	wore than \$50 billion
20.	How much do you	□ \$0 - \$5	0,000	□ \$1,000,001 - \$10 million		\$500,000,001 - \$1 billion
	estimate your liabilities to be?		1 - \$100,000	□ \$10,000,001 - \$50 millio		\$1,000,000,001 - \$10 billion
			01 - \$500,000	□ \$50,000,001 - \$100 mill □ \$100,000,001 - \$500 mi		\$10,000,000,001 - \$50 billion More than \$50 billion
		₩ \$500,00	O1 - \$1 million	— \$100,000,001 - \$500 IIII		Wore than 450 billion
Part	7: Sign Below					
For	you	I have exa	mined this petition, and I declare	under penalty of perjury that t	the information pro	ovided is true and correct.
			nosen to file under Chapter 7, I an tes Code. I understand the relief			
			ey represents me and I did not pa I have obtained and read the not			ney to help me fill out this
		I request re	elief in accordance with the chapt	er of title 11, United States Co	ode, specified in the	his petition.
		bankruptcy and 3571.	nd making a false statement, conductor case can result in fines up to \$2 are a Dee Blunt			y by fraud in connection with a poth. 18 U.S.C. §§ 152, 1341, 1519,
			ee Blunt	Signature	of Debtor 2	
		Executed		Executed	on	
			MM / DD / YYYY		MM / DD / Y	YYY

Debtor 1 Sandra Dee Blunt Document Page 7 of 62 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jeffrey	L. Benson	Date	April 18, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Jeffrey L.	Benson		
Law Office	es of Jeffrey L. Benson		
3337 W. 9	5th Street		
Ste. # 2			
Evergreen	Park, IL 60805		
Number, Street,	City, State & ZIP Code		
Contact phone	312-607-0048	Email address	jeffrey-benson@sbcglobal.net
6203738			
Bar number & S	tata		

		DOCUM	<u>-:ni Pade 8 01 67 </u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Sandra Dee Blun	t		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	131,993.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	5,225.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	137,218.00
Pa	rt 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	149,768.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	113,008.00
	Your total liabilities	\$	262,776.00
Pa	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,633.99
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,759.96
Pa	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$

2,974.28

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	C	Case 16-13181		iled 04/18/16 Document	Entered 04/18/16	17:15:09	Desc N	⁄lain
Fill	in this info	ormation to identify you						
Deb	otor 1	Sandra Dee Blu	ınt					
		First Name	Middle N	lame	Last Name			
	otor 2 use, if filing)	First Name	Middle N	lame	Last Name			
Unit	ted States	Bankruptcy Court for the	: NORTHERN	DISTRICT OF ILLIN	IOIS			
Cas	se number							Check if this is an amended filing
SC n ea nink nfor	cheduch category	Be as complete and accu ore space is needed, atta	ribe items. List an urate as possible.	If two married people	n asset fits in more than one c are filing together, both are e top of any additional pages, v	qually responsible	e for supplyir	ng correct
	No. Go to F		ble interest in any	y residence, building,	land, or similar property?			
1.1		idgewood Drive ss, if available, or other descripti	on	What is the property ☐ Single-family h ☐ Duplex or multi ☐ Condominium	ome i-unit building	Do not deduct sec the amount of any Creditors Who Ha	secured clain	ns on Schedule D:
	Hazel C City	rest IL 6	0429-0000 ZIP Code	Land Investment pro Timeshare Other Who has an interest	perty in the property? Check one		por 3.00 ure of your or ole, tenancy l	rent value of the tion you own? \$131,993.00 wnership interest by the entireties, or
	County				the debtors and another ou wish to add about this item,	Check if this (see instructions such as local		ty property
				property identification	n number:			

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$131,993.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Debt	or 1	Sandra Dee Blunt	Document	Page 11 of 62	se number (if known)	
3. Ca	rs, vai	ns, trucks, tractors, sport utility ve	ehicles, motorcycles			
	No					
	Yes					
3.1	Make Mode	Daines	Who has an interest in the	e property? Check one	the amount of any s	red claims or exemptions. Put ecured claims on Schedule D: e Claims Secured by Property.
	Year:	2005	Debtor 2 only		Current value of th	e Current value of the
		eximate mileage: 289,000	Debtor 1 and Debtor 2 of	only	entire property?	portion you own?
		information:	At least one of the debto	ors and another		
	Car	needs new transmission	Check if this is communicated (see instructions)	unity property	\$1,000 .	\$1,000.00
.pa	ages y	dollar value of the portion you ov ou have attached for Part 2. Write cribe Your Personal and Household In n or have any legal or equitable in	that number heretems			\$1,000.00 Current value of the portion you own?
<i>E</i> ;	kample No	old goods and furnishings es: Major appliances, furniture, linens Describe	s, china, kitchenware			Do not deduct secured claims or exemptions.
		Household God	ods and Furniture			\$2,000.00
<i>E</i> :	No	ics es: Televisions and radios; audio, vidincluding cell phones, cameras, r Describe		oment; computers, printer	s, scanners; music co	lections; electronic devices
E)	kample No	oles of value es: Antiques and figurines; paintings, other collections, memorabilia, co		oks, pictures, or other art	objects; stamp, coin, o	or baseball card collections;
<i>E</i> 2	kample No	ent for sports and hobbies es: Sports, photographic, exercise, a musical instruments Describe	nd other hobby equipment;	bicycles, pool tables, golf	clubs, skis; canoes ar	nd kayaks; carpentry tools;
	irearm E <i>xamp</i> No	ns les: Pistols, rifles, shotguns, ammun	ition, and related equipment	t		

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De	ebtor 1	Sandra Dee Blunt		Document	Page 12 of 62 Case number (if known)	
	☐ Yes.	Describe				
	□ No	es ples: Everyday clothes, furs, Describe	leather coats	, designer wear, shoes,	accessories	
		Clothes	S			\$500.00
-						
	■ No		ume jewelry, e	engagement rings, wed	ding rings, heirloom jewelry, watches, gems, g	old, silver
	Exam _l ■ No	irm animals ples: Dogs, cats, birds, horse Describe	es			
	■ No	ther personal and househo	-	did not already list, in	ncluding any health aids you did not list	
15		the dollar value of all of yo art 3. Write that number he			ny entries for pages you have attached	\$3,000.00
Pa	rt 4: De	escribe Your Financial Assets				
Do	o you ov	wn or have any legal or eq	uitable intere	st in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	ples: Money you have in you			osit box, and on hand when you file your petition	on
				accounts; certificates counts with the same ins	of deposit; shares in credit unions, brokerage h titution, list each.	nouses, and other similar
	_			Institution n	ame:	
		17.1.		Illiana Cre No baland	edit Union checking and savings - ce kept	\$0.00
18.		s, mutual funds, or publicly ples: Bond funds, investmen			ey market accounts	
	☐ Yes	lr	nstitution or iss	suer name:		
	joint v	ublicly traded stock and in enture	nterests in inc	corporated and unince	orporated businesses, including an interes	t in an LLC, partnership, and
	■ No □ Yes.	Give specific information a	bout them e of entity:		% of ownership:	
	Negot		rsonal checks	, cashiers' checks, pror	egotiable instruments missory notes, and money orders. by signing or delivering them.	
		Give specific information at m 106A/B	oout them	Schedule A/B: F	Property	page 3
	iviai i Ull	11 100/7/10		Contradit A/D. F	roporty	page 3

De	ebtor 1 Sandra Dee	Blunt	Case number (if known)	
		Issuer name:		
	Retirement or pensio Examples: Interests in No		k), 403(b), thrift savings accounts, or other pension or profit-sharing pla	ns
	Yes. List each accou	int separately. Type of account:	Institution name:	
		Pension	Pension - 100% Exempt	Unknown
		401(k)	401k - 100% Exempt	\$505.00
22.		ed deposits you have made	e so that you may continue service or use from a company ent, public utilities (electric, gas, water), telecommunications companies	s, or others
	☐ Yes		Institution name or individual:	
	Annuities (A contract ■ No	for a periodic payment of m	noney to you, either for life or for a number of years)	
		ssuer name and description	n.	
24.	26 U.S.C. §§ 530(b)(1)	ion IRA, in an account in ,529A(b), and 529(b)(1).	a qualified ABLE program, or under a qualified state tuition program	am.
	■ No □ Yes	nstitution name and descrip	otion. Separately file the records of any interests.11 U.S.C. § 521(c):	
	■ No	uture interests in property	y (other than anything listed in line 1), and rights or powers exerci	sable for your benefit
	·		s, and other intellectual property	
	Examples: Internet do No	main names, websites, pro	ceeds from royalties and licensing agreements	
	·	nformation about them		
27.		, and other general intang ermits, exclusive licenses, c	gibles cooperative association holdings, liquor licenses, professional licenses	
		formation about them		
Mo	oney or property owed	to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to	you		
	■ No □ Yes. Give specific in	formation about them, inclu	uding whether you already filed the returns and the tax years	
29.	Family support Examples: Past due o ■ No	r lump sum alimony, spous	al support, child support, maintenance, divorce settlement, property se	ttlement
	■ No Yes. Give specific in	formation		
30	Other amounts some	one owes you		
	Examples: Unpaid wa benefits; u		nyments, disability benefits, sick pay, vacation pay, workers' compensation one else	ation, Social Security
	■ No□ Yes. Give specific ir	nformation		

Document

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Dobtor 1	Condra Das Blunt	Document	Page 14 of 62 Case number (if known)	
Debtor 1	Sandra Dee Blunt		Case number (if known)	
	ests in insurance policies mples: Health, disability, or life insurance; h	ealth savings account	(HSA); credit, homeowner's, or renter's insurar	nce
■ Yes	s. Name the insurance company of each po	olicy and list its value.		
	Company name:	•	Beneficiary:	Surrender or refund value:
	Term Life Insur surrender value			\$0.00
If you some No	interest in property that is due you from u are the beneficiary of a living trust, expeceone has died. s. Give specific information		ed nsurance policy, or are currently entitled to reco	eive property because
	ns against third parties, whether or not y mples: Accidents, employment disputes, ins			
■ No □ Yes	s. Describe each claim			
■ No	r contingent and unliquidated claims of s. Describe each claim	every nature, includii	ng counterclaims of the debtor and rights to	set off claims
□ No	financial assets you did not already list s. Give specific information			
_ 100	·			
	Time S	hare		\$720.00
	the dollar value of all of your entries fro Part 4. Write that number here		, , , , , , , , , , , , , , , , , , , ,	\$1,225.00
Part 5:	Describe Any Business-Related Property You	Own or Have an Interest	In. List any real estate in Part 1.	
■ No. (u own or have any legal or equitable interest i Go to Part 6. Go to line 38.	n any business-related	property?	
	Describe Any Farm- and Commercial Fishing-I f you own or have an interest in farmland, list it in		vn or Have an Interest In.	
■ N	ou own or have any legal or equitable in o. Go to Part 7. es. Go to line 47.	terest in any farm- or	commercial fishing-related property?	
Part 7:	Describe All Property You Own or Have a	n Interest in That You Di	id Not List Above	
Exar ■ No	ou have other property of any kind you on mples: Season tickets, country club members. Give specific information			

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

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Case number (if known) Document Debtor 1 Sandra Dee Blunt

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$131,993.00
56.	Part 2: Total vehicles, line 5	\$1,000.00		
57.	Part 3: Total personal and household items, line 15	\$3,000.00		
58.	Part 4: Total financial assets, line 36	\$1,225.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$5,225.00	Copy personal property total	\$5,225.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$137,218.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	rmation to identify your	case:		
Debtor 1	Sandra Dee Blun	1		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
17805 Ridgewood Drive Hazel Crest, IL 60429 Cook County	\$131,993.00		\$15,000.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2005 Buick Rainer 289,000 miles Car needs new transmission	\$1,000.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
lousehold Goods and Furniture	\$2,000.00		\$2,000.00	735 ILCS 5/12-1001(b)
Ellie Holli Gonedale A. D. G			100% of fair market value, up to any applicable statutory limit	
2 TVs Line from Schedule A/B: 7.1	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Ellie Holli Gonedale A.B. 111			100% of fair market value, up to any applicable statutory limit	
Clothes Line from Schedule A/B: 11.1	\$500.00		\$500.00	735 ILCS 5/12-1001(a)
Ello Holli Goriculio 7/D. TTT			100% of fair market value, up to any applicable statutory limit	

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Case number (if known)

DCDIC	Sandia Dee Didnit			odsc Humber (II known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption
	, , ,	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Pension: Pension - 100% Exempt Line from Schedule A/B: 21.1	Unknown		100%	735 ILCS 5/12-1006
	Ellic Holli Genedale 74 b. 2 111			100% of fair market value, up to any applicable statutory limit	
	401(k): 401k - 100% Exempt Line from Schedule A/B: 21.2	\$505.00		100%	735 ILCS 5/12-1006
	Line Holli Golledale A/D. 21.2			100% of fair market value, up to any applicable statutory limit	
	Term Life Insurance - No cash surrender value	\$0.00		100%	735 ILCS 5/12-1001(f)
	Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
	Time Share Line from Schedule A/B: 35.1	\$720.00		\$720.00	735 ILCS 5/12-1001(b)
ı	Line Holli Schedule A/B. 33.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustmer	nt.)
	Yes. Did you acquire the property cover	red by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No				
	П Уде				

	<u>Document Pa</u>	age 18 of 62		
Fill in this information to identify yo	ur case:			
Debtor 1 Sandra Dee Blu	unt			
First Name		t Name	-	
Debtor 2			_	
(Spouse if, filing) First Name	Middle Name Las	t Name		
United States Bankruptcy Court for the	e: NORTHERN DISTRICT OF ILLINOI	S	_	
Casa number				
Case number (if known)			☐ Check	if this is an
				led filing
				-
Official Form 106D				
Schedule D: Creditors	s Who Have Claims Se	cured by Propert	ty	12/15
	If two married people are filing together, be out, number the entries, and attach it to thi			
1. Do any creditors have claims secured b	by your property?			
☐ No. Check this box and submit	this form to the court with your other sche	edules. You have nothing else	to report on this form.	
Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims				
	more then are accurred claim list the avaditor.	Column A	Column B	Column C
	more than one secured claim, list the creditor is a particular claim, list the other creditors in P tical order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion If any
2.1 Summer Bay	Describe the property that secures the cl		\$720.00	\$1,280.00
Creditor's Name	Time Share			
25 Town Center Blvd. Ste. C	As of the date you file, the claim is: Check	all that		
Clermont, FL 34714	apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
,,,,	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortg	age or secured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)		
$\hfill \square$ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number			
2.2 Wells Fargo Home	Describe the way out of that consumes the old	laim: \$147,768.00	\$131,993.00	\$15,775.00
Mortgage Creditor's Name	Describe the property that secures the cl			
	IL 60429 Cook County	1031,		
P.O. Box 10335	As of the date you file, the claim is: Check apply.	all that		
Des Moines, IA 50306	☐ Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
_	☐ An agreement you made (such as mortg			
■ Debtor 1 only	car loan)	age or secured		
Debtor 2 only	_	olo lion)		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic ☐ Judgment lien from a lawsuit	os iiett)		
Check if this claim relates to a	☐ Other (including a right to offset)			
community debt	care. (morading a right to onset)			
Date debt was incurred	Last 4 digits of account number	5785		
PALO MONETTAN HIGHII GU	Lust - ulyita vi accoult liuliibel	U 1 U U		

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Debtor 1	Sandra Dee Blunt			Case number (if know)	
	First Name	Middle Name	Last Name		
Add the	dollar value of yo	our entries in Column A on t	this page. Write that number here:	\$149.768.0	0
	the last page of	your form, add the dollar va	lue totals from all pages.	\$149,768.0	0

Part 2: List Others to Be Notified for a Debt That You Already Listed

Write that number here:

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	0430 10 10101	Document	Page 20) of 62	Dese Main	
Fill in this	information to identify your					
Debtor 1	Sandra Dee Blunt					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name			
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLI	NOIS			
Case num	ber					
(if known)					☐ Check if this is an	
					amended filing	
Official	Form 106E/F					
		ho Have Unsecured (Claims		12/15	
		e Part 1 for creditors with PRIORITY		Part 2 for creditors with NONPRIOR		
Schedule G Schedule D left. Attach t	: Executory Contracts and Unexp : Creditors Who Have Claims Sect	that could result in a claim. Also lis ired Leases (Official Form 106G). Do ured by Property. If more space is n e. If you have no information to repo	o not include a eeded, copy t	any creditors with partially secure he Part you need, fill it out, numbe	d claims that are listed in er the entries in the boxes on the	
Part 1:	List All of Your PRIORITY Un	secured Claims				
1. Do any	creditors have priority unsecured	d claims against you?				
No.	Go to Part 2.					
☐ Yes	i.					
	List All of Your NONPRIORIT					
3. Do any	r creditors have nonpriority unsec	ured claims against you?				
☐ No.	You have nothing to report in this pa	art. Submit this form to the court with y	our other sche	dules.		
Yes).					
unsecu	red claim, list the creditor separately	aims in the alphabetical order of the of for each claim. For each claim listed, st the other creditors in Part 3.If you ha	identify what ty	ype of claim it is. Do not list claims al	Iready included in Part 1. If more	
					Total claim	
	better Door & Window	Last 4 digits of acco	unt number	0021	\$210.00	
	onpriority Creditor's Name O3 Glenwood Road	When was the debt i	ncurred?			
	hicago Heights, IL 60411	When was the debt i	ilicuireu:			
Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply						
	ho incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only					
	At least one of the debtors and and	I claim:				
☐ Check if this claim is for a community debt ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you						
	the claim subject to offset?	☐ Obligations arising report as priority claim	ration agreement or divorce that you	ala not		
	No	Debts to pension of	or profit-sharing	g plans, and other similar debts		
	l _{Yes}	Other. Specify	ebt Owed			
_		— Other, Specify				

Page 21 of 62 Case number (if know) Document Debtor 1 Sandra Dee Blunt 4.2 \$5,450.00 **Acme Continental Credit Union** Last 4 digits of account number 4860 Nonpriority Creditor's Name 13601 South Perry Avenue When was the debt incurred? Riverdale, IL 60827-1655 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Judgment 4.3 **Advocate Medical Group** Last 4 digits of account number 4615 \$460.00 Nonpriority Creditor's Name 701 Lee Street When was the debt incurred? Des Plaines, IL 60016 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Bills** Other. Specify 4.4 **Allied Collection Service** Last 4 digits of account number \$102.00 **XXXX** Nonpriority Creditor's Name 8550 Balboa Blvd. When was the debt incurred? Ste. 232 Northridge, CA 91325 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

■ No

☐ Yes

report as priority claims

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

■ Other. Specify Debt Owed: Original Creditor - Nutribullet

Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Debtor 1 Sandra Dee Blunt 4.8 \$279.00 **BYL Collection Services** Last 4 digits of account number 7871 Nonpriority Creditor's Name 301 Lacey Street When was the debt incurred? West Chester, PA 19382 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Debt Owed: Original Creditor - Fluidity** ■ Other. Specify Home, LLC ☐ Yes Multiple Chicago Department of Revenue \$1,344.00 4.9 Last 4 digits of account number **Accounts** Nonpriority Creditor's Name When was the debt incurred? **Remittance Center** P.O. Box 88292 Chicago, IL 60680 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Fines/Parking Tickets ☐ Yes 4.1 Chicago Tribune 6462 \$20.00 Last 4 digits of account number 0 Nonpriority Creditor's Name P.O. Box 9001157 When was the debt incurred? Louisville, KY 40290 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Newspaper Subsciption ☐ Yes

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Debtor 1 Sandra Dee Blunt Case number (if know) 4.1 CitiFinancial 5160 \$14,941.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 183172 When was the debt incurred? Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Judgment 4.1 Comcast \$324.00 Last 4 digits of account number XXXX Nonpriority Creditor's Name When was the debt incurred? P.O. Box 173885 **Denver, CO 80217** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Other. Specify Cable Bill ☐ Yes Multiple 4.1 **Commonwealth Finance** \$13,075.00 Last 4 digits of account number **Accounts** Nonpriority Creditor's Name 245 Main Street When was the debt incurred? Scranton, PA 18519 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Medical Bills: Original Creditor - Emp of

☐ Yes

Other. Specify Cook County, LLC

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Debtor 1 Sandra Dee Blunt Case number (if know) 4.1 **Consultants in Pathology** 8113 \$36.00 Last 4 digits of account number 4 Nonpriority Creditor's Name P.O. Box 3039 When was the debt incurred? Charleston, SC 29417 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes 4.1 **Cook County Health and Hospitals** 2603 \$333.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 70121 Chicago, IL 60673 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.1 Department of Ed/Nelnet \$46.028.00 **XXXX** 6 Last 4 digits of account number Nonpriority Creditor's Name 4150 N. Drinkwater Blvd. When was the debt incurred? Ste. 200 Scottsdale, AZ 85251 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Student Loan

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Case number (if know) Debtor 1 Sandra Dee Blunt 4.1 **Direct TV** \$275.00 XXXX Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 78627 When was the debt incurred? Phoenix, AZ 85062 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Cable Bill 4.1 Dr. Tajudeen Ogbara 1316 \$376.00 Last 4 digits of account number 8 Nonpriority Creditor's Name When was the debt incurred? 9201 Calumet Avenue Munster, IN 46321 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.1 Franciscan Alliance, Inc. 2243 \$911.00 9 Last 4 digits of account number Nonpriority Creditor's Name 37621 Eagle Way When was the debt incurred? Chicago, IL 60678 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ No

☐ Yes

Other. Specify

Medical Bills

Page 27 of 62 Case number (if know) Document Debtor 1 Sandra Dee Blunt 4.2 **Hanover Premium Finance** 2631 \$361.00 Last 4 digits of account number 0 Nonpriority Creditor's Name P.O. Box 2243 When was the debt incurred? Bridgeview, IL 60455 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Debt Owed ☐ Yes Multiple 4.2 Illinois State Toll Highway Auth. Unknown Last 4 digits of account number **Accounts** Nonpriority Creditor's Name 2700 Ogden Ave When was the debt incurred? Downers Grove, IL 60515 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Tolls 4.2 **Ingalls Memorial Hospital** \$3,452.00 Last 4 digits of account number Nonpriority Creditor's Name One Ingalls Drive When was the debt incurred? Harvey, IL 60426 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Medical Bills

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Case number (if know) Debtor 1 Sandra Dee Blunt 4.2 JVDB & Associates \$3,984.00 XXXX Last 4 digits of account number 3 Nonpriority Creditor's Name P.O. Box 5718 When was the debt incurred? Elgin, IL 60121 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Debt Owed: Original Creditor- Bell Leasing** ☐ Yes Other. Specify Brokerage LLC 4.2 **MCSI MCSIxxxx** \$250.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 7330 College Drive Palos Heights, IL 60463 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Fines/Parking Tickets** Other. Specify 4.2 **MCSI MCSIxxxx** \$58.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 7330 College Drive Palos Heights, IL 60463 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts Fines/Parking Tickets: City of Chicago ☐ Yes Other. Specify Heights

Page 29 of 62 Case number (if know) Document Debtor 1 Sandra Dee Blunt 4.2 MCSI **MCSIxxxx** \$1,200.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 7330 College Drive When was the debt incurred? Palos Heights, IL 60463 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Fines/Parking Tickets ☐ Yes 4.2 Merchants Credit Guide Co. \$275.00 Last 4 digits of account number **XXXX** Nonpriority Creditor's Name 223 W. Jackson Street When was the debt incurred? Ste. 900 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Medical Bills: Original Credit - Prairie State ☐ Yes Other. Specify Pulmonary 4.2 Radiology Imaging Consultants 1590 \$43.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 9413 Eagle Way Chicago, IL 60678 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Medical Bills

 \square Debts to pension or profit-sharing plans, and other similar debts

Document Page 30 of 62 Debtor 1 Sandra Dee Blunt Case number (if know) 4.2 South Suburban Cardiology Assoc. 3831 \$55.00 Last 4 digits of account number 9 Nonpriority Creditor's Name P.O. Box 5858 When was the debt incurred? Belfast, ME 04915 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes 4.3 South Suburban Gastroenterology 4721 \$180.00 Last 4 digits of account number 0 Nonpriority Creditor's Name When was the debt incurred? 17901 Governors HWY Ste. 208 Homewood, IL 60430 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes Multiple 4.3 \$10,628.00 St. James Hospital & Health Center Last 4 digits of account number **Accounts** Nonpriority Creditor's Name When was the debt incurred? 1423 Chicago Road Chicago Heights, IL 60411 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Medical Bills

Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 Sandra Dee Blunt Case number (if know) 4.3 Sullivan Urgent Aid Center \$471.00 XXXX Last 4 digits of account number 2 Nonpriority Creditor's Name P.O. Box 87844 When was the debt incurred? Carol Stream, IL 60188 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes 4.3 **Sweepstakes Clearing House** 1913 \$76.00 Last 4 digits of account number Nonpriority Creditor's Name 1555 Regal Row When was the debt incurred? Dallas, TX 75247 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Other. Specify Debt Owed ☐ Yes 4.3 T-Mobile \$154.00 **XXXX** Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 742596 When was the debt incurred? Cincinnati, OH 45274 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Cellular Phone Bill ☐ Yes

Page 32 of 62 Document Debtor 1 Sandra Dee Blunt Case number (if know) 4.3 TCF Bank 3999 \$965.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 800 Burr Ridge Parkway When was the debt incurred? Burr Ridge, IL 60521 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Debt Owed 4.3 **Trustmark Recovery Services** 0775 \$43.00 Last 4 digits of account number 6 Nonpriority Creditor's Name When was the debt incurred? 541 Otis Bowen Drive Munster, IN 46321 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Medical Bills: Original Creditor - Oak Lawn ☐ Yes Other. Specify Radiology at St. James 4.3 **US Bank** 3353 \$318.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 790084 When was the debt incurred? Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Overdraft Account

Is the claim subject to offset?

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Name and Address **Debt Recovery Solutions** P.O. Box 9001

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.34 of (Check one):

Last 4 digits of account number

☐ Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Name and Address **DSG Collect**

Line 4.29 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

P.O. Box 9004

Renton, WA 98057

Westbury, NY 11590

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600 Holiday Plaza Matteson, IL 60443

Name and Address NCO Fin/90

Schedule E/F: Creditors Who Have Unsecured Claims

Line 4.21 of (Check one):

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

☐ Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

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Debtor 1 Sandra Dee Blunt		Case number (if know)		
Name and Address	On which entry in Part 1 or Part	art 2 did you list the original creditor?		
Recievable Performance Line <u>4.34</u> of (Check one):		☐ Part 1: Creditors with Priority Unsecured Claims		
10413 Beardslee Blvd.		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Syracuse, NY 13205	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
United Recovery Service	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
18525 Torrence Ave.		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Ste. C-6 Lansing, IL 60438				
	Last 4 digits of account number			

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	\$	Total Claim
Total claims	Oi.	ottudent loans	OI.	»	0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	113,008.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	113,008.00

		1700.11111			
Fill in this information to identify your case:					
Debtor 1	Sandra Dee Blun				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)				_	c if this is an

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Name, Number, Street, City, State and ZIP Code				contract or lease	State what the contract or lease is for
2.1					
	Name				_
					_
	Number	Street			
					_
	City		State	ZIP Code	
2.2					_
	Name				
	Number	Street			_
	Number	Olleet			
	City		State	ZIP Code	_
2.3	Oity		Otato	Zii Oodc	
2.5	Name				_
	ivame				
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
					_
	Number	Street			
					_
	City		State	ZIP Code	
2.5					_
	Name				
	Number	Street			_
	MULLIDE	Gueer			
	City		State	ZIP Code	_
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Fill in this inf	ormation to identify your				
Debtor 1	Sandra Dee Blun	•			
200101	First Name	Middle Name	Last Name		
Debtor 2	F: AN	A			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Schedu	Form 106H le H: Your Cod		to use a large Road		12/15
people are fili ill it out, and our name an	ng together, both are equ	ally responsible for supp boxes on the left. Attach . Answer every question	olying correct informat the Additional Page t .	ion. If more space is r o this page. On the to	ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
i. Do you	i have any codebiors? (ii)	you are illing a joint case, o	uo not list either spouse	as a codebior.	
■ No □ Yes					
Arizona, (☐ No. Go ☐ Yes. D 3. In Colum	California, Idaho, Louisiana, to line 3. id your spouse, former spou	Nevada, New Mexico, Puuse, or legal equivalent live	erto Rico, Texas, Wash with you at the time? spouse as a codebtor	ington, and Wisconsin.)	g with you. List the person shown
	SD), Schedule E/F (Official				he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	umn 1: Your codebtor e, Number, Street, City, State and ZI	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1 Nam	ne			☐ Schedule D, lin☐ Schedule E/F,☐ Schedule G, lin	line
Num City		State	ZIP Code		
3.2 Nam	ne			☐ Schedule D, lin☐ Schedule E/F,☐ Schedule G, lin☐ Schedule G	line
Num		State	ZIP Code	_	

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Fill	in this information to identify your ca	ase:						
	otor 1 Sandra Dee							
	otor 2 ouse, if filing)				_			
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_			
(If kr	fficial Form 106l					13 income	ed filing ent showing post as of the followin	
_	chedule I: Your Inc	ome				MM / DD/ Y	YYY	12/15
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your sp th you, do not include	ouse i	s living nation a	with you, included the with your spoot your spoot with the witten with the	ude information ouse. If more sp	about your ace is needed,
1.	Fill in your employment information.		Debtor 1	Debtor 1			2 or non-filing s _l	pouse
	If you have more than one job,	Employment status	■ Employed	■ Employed			oyed	
	attach a separate page with information about additional	zmproyment status	☐ Not employed			☐ Not e	mployed	
	employers.	Occupation	Administrator					
	Include part-time, seasonal, or self-employed work.	Employer's name	Village of Hazelcrest					
	Occupation may include student or homemaker, if it applies.	Employer's address	3000 W. 170th Pla Hazel Crest, IL 60					
		How long employed the	here? 4 months	.				
Pai	ct 2: Give Details About Mor	nthly Income						
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to rep	ort for a	any line,	write \$0 in the	space. Include y	our non-filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information f	or all e	mployeı	s for that perso	on on the lines be	low. If you need
					Fo	r Debtor 1	For Debtor 2 non-filing spo	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	5,191.15	\$	N/A
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A

Calculate gross Income. Add line 2 + line 3.

5,191.15

N/A

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Deb	tor 1	Sandra Dee Blunt	_	С	ase number (<i>if ki</i>	nown)				
					For Dobton 4		Г-	. Dabtas	2	
					For Debtor 1			r Debtor n-filing s		
	Сор	y line 4 here	4.		\$5,191	1.15	\$	9	N/A	<u> </u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$ 832	2.10	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.			3.59	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.			3.59	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d.			0.00	\$		N/A	_
	5e.	Insurance	5e.		\$ 158	3.28	\$		N/A	
	5f.	Domestic support obligations	5f.			0.00	\$_		N/A	_
	5g.	Union dues	5g.			9.60	\$_		N/A	_
	5h.	Other deductions. Specify:	5h	.+	\$	0.00	+ \$_		N/A	<u>.</u>
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ <u>1,557</u>		\$_		N/A	_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	,	\$ 3,633	3.99	\$_		N/A	<u> </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receibly not income.	92		\$		¢		N/A	
	8b.	monthly net income. Interest and dividends	8a. 8b.			0.00 0.00	\$ \$		N/A N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive		•	Ψ	<i>J</i> .00	Ψ_		IN/A	<u>.</u>
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$ (0.00	\$		N/A	
	8d.	Unemployment compensation	8d			0.00	\$		N/A	
	8e.	Social Security	8e.		\$ (0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.			0.00	\$_		N/A	_
	8g.	Pension or retirement income	8g.			0.00	\$_		N/A	_
	8h.	Other monthly income. Specify:	8h	.+	\$	0.00	+ \$_		N/A	<u>\</u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	(0.00	\$_		N/A	A
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	3,633.99	+ \$		N/A	= \$	3,633.99
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		*-	0,000.00					0,000.00
11.	11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00									
12.		I the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailies						e. 12.	\$	3,633.99
									Combi month	ned ly income
13.	Do y	you expect an increase or decrease within the year after you file this form	?							
		No.								
		Yes Explain:								

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Fill	in this information to i	dentify your ca	ase:					
Deb	otor 1 Sand	Ira Dee Blur	nt			Che	ck if this is:	
	otor 2 ouse, if filing)						An amended filing A supplement show 13 expenses as of	wing postpetition chapter the following date:
Unit	ted States Bankruptcy Co	ourt for the: No	ORTHERN	DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Cas	se number							
(If k	nown)							
Of	fficial Form 1	106J						
S	chedule J: Y	our Ex	pense	S				12/15
info	as complete and acc ormation. If more sp mber (if known). Ans	ace is needed	l, attach an	o married people ar other sheet to this	e filing together, be form. On the top of	oth are equ any additi	ually responsible fo onal pages, write y	or supplying correct your name and case
		ur Household						
1.	Is this a joint case	?						
	■ No. Go to line 2. ☐ Yes. Does Debt	or 2 live in a s	separate ho	ousehold?				
	□ No		•					
	☐ Yes. Deb	otor 2 must file	Official For	m 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	otor 2.	
2.	Do you have deper	ndents?	No					
	Do not list Debtor 1 Debtor 2.	and 🔲	1 03.	ut this information for dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state the							□ No
	dependents names.							□ Yes □ No
								☐ Yes
								□ No
							_	☐ Yes
								□ No □ Yes
3.	Do your expenses		■ No					□ 163
	expenses of peopl yourself and your		☐ Yes					
D	<u> </u>	•	d. b -					
Est		s as of your b	ankruptcy	filing date unless y				apter 13 case to report of the form and fill in the
the	lude expenses paid value of such assis ficial Form 106I.)						Your exp	enses
	,							
4.	The rental or home payments and any r			or your residence. I	nclude first mortgage	e 4.	\$	1,123.30
	If not included in li	ine 4:						
	4a. Real estate ta					4a.		0.00
	•	neowner's, or i				4b.		0.00
		nance, repair, association o				4c. 4d.		100.00 0.00
5.				sidence , such as ho	me equity loans	5.	·	0.00

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\$ \$ \$	350.00 66.66
\$	
\$	
\$	00.00
·	50.00
	0.00
\$	
·	450.00
\$	0.00
\$	250.00
·	100.00
\$	100.00
\$	300.00
·	
•	150.00
\$	160.00
¢	0.00
·	0.00
·	0.00
·	60.00
\$	0.00
•	
\$	0.00
•	
·	0.00
·	0.00
·	500.00
\$	0.00
r.	0.00
·	
\$	0.00
_	
	0.00
· -	0.00
·	0.00
\$	0.00
\$	0.00
+\$	0.00
	3,759.96
\$	
\$	3,759.96
	3,633.99
-\$	3,759.96
c	-125.97
۳	-123.31
a farm 2	
	decrease because o
payment to increase of	acciease because (
	Sour Income. - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -

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Fill in this infor	mation to identify your	case:			
Debtor 1	Sandra Dee Blun	t			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
O(() : -1 E	400D				
Official For					
Declarat	tion About a	an Individual	Debtor's So	chedules	12/15
If two married p	eople are filing togethe	r, both are equally respor	nsible for supplying co	rrect information.	
You must file th	is form whenever you f	ile bankruptcy schedules	or amended schedule	s. Making a false state	ement, concealing property, or
			ruptcy case can result	in fines up to \$250,00	00, or imprisonment for up to 20
years, or both. 1	18 U.S.C. §§ 152, 1341,	1519, and 35/1.			
Sig	n Below				
Did you pa	ay or agree to pay some	eone who is NOT an attori	ney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Ban	kruptcy Petition Preparer's Notice,
				Declaration	n, and Signature (Official Form 119)
	alty of perjury, I declare	that I have read the sum	mary and schedules fil	ed with this declaration	on and
_			v		
	ndra Dee Blunt		X Signature o	f Dobtor 2	
	a Dee Blunt ire of Debtor 1		Signature o	II Debloi Z	

Date _____

Date April 18, 2016

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Fill	in this informa	tion to identify you	r case:						
Der	otor 1	Sandra Dee Blui First Name	Middle Name	Last Name					
1	otor 2 use if, filing)	First Name	Middle Name	Last Name					
Uni	ted States Bank	ruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS					
Cas	se number								
(if kn	own)				-	theck if this is an mended filing			
~ .	.	4.0-							
	ficial For		Affaina fan Indiai	duala Filima fan D					
			Affairs for Individ			4/16			
info	rmation. If mo	re space is needed,	attach a separate sheet to		equally responsible for sup additional pages, write you				
num	ber (if known)	Answer every que	stion.						
Par	t 1: Give De	tails About Your Ma	arital Status and Where You	Lived Before					
1.	What is your o	urrent marital statu	ıs?						
	☐ Married	a d							
	■ Not marrie								
2.	During the las	e last 3 years, have you lived anywhere other than where you live now?							
	■ No □ Yes. List a	No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.							
	Debtor 1 Prio	r Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
					ity property state or territory co, Texas, Washington and W				
	■ No								
	_	e sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).					
Par	t 2 Explain	the Sources of You	r Income						
	•								
4.	Fill in the total	amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?			
	□ No								
	Yes. Fill in	the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
		current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$12,977.00	☐ Wages, commissions, bonuses, tips				
			☐ Operating a business		☐ Operating a business				

Official Form 107

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Case number (if known) Debtor 1 Sandra Dee Blunt

5.	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1								
			De	htor 1			Debtor 2		
			So	urces of income scribe below.	each (befo	ss income from a source ore deductions and usions)	Sources of in Describe below		Gross income (before deductions and exclusions)
Pai	rt 3: List	Certain Pa	yments You Mad	le Before You Filed fo	r Bankru	ptcy			
6.	List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." ☐ During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? ☐ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. ■ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ■ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.								ne total amount you nd alimony. Also, do creditor. Do not
	Creditor	s Name an	u Address	Dates of payn	ient	Total amount paid	Amount you still owe	was this p	ayment for
7.	Insiders in of which y a business alimony.	clude your i ou are an of s you operat	relatives; any gene fficer, director, per	ekruptcy, did you make eral partners; relatives of son in control, or owne etor. 11 U.S.C. § 101. I	of any ger r of 20% o	neral partners; partners partners partners of their votin	erships of which yog g securities; and a	ou are a gene Iny managing	al partner; corporation agent, including one fo
	Insider's	Name and	Address	Dates of payn	nent	Total amount paid	Amount you still owe	Reason fo	r this payment
8.	insider? Include pa	lyments on		kruptcy, did you make or cosigned by an insid		•	23.11. 2.11.2	account of a c	lebt that benefited an
	Insider's	Name and	Address	Dates of payn	nent	Total amount	Amount you		r this payment
						paid	still owe	include cre	ditor's name

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Case number (if known) Document Debtor 1 Sandra Dee Blunt

Pa	t 4: Identify Legal Actions, Repossess	ions, and Foreclosures							
9.	Within 1 year before you filed for bankru List all such matters, including personal injumodifications, and contract disputes.								
	■ No								
	Yes. Fill in the details.	N. C.	•	201 (11					
	Case title Case number	Nature of the case	Court or agency	Status of the	e case				
10.	Within 1 year before you filed for bankru Check all that apply and fill in the details be		rty repossessed, foreclosed	, garnished, attached	, seized, or levied?				
	No. Go to line 11.								
	Yes. Fill in the information below. Creditor Name and Address	Describe the Bronerty		Data	Value of the				
	Creditor Name and Address	Describe the Property		Date	property				
		Explain what happened							
	Within 90 days before you filed for banks accounts or refuse to make a payment b No Yes. Fill in the details.		uding a bank or financial ins	stitution, set off any a	mounts from your				
	Creditor Name and Address	Describe the action the	creditor took	Date action was	Amount				
				taken					
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, or	ptcy, was any of your proper r another official?	rty in the possession of an a	assignee for the bene	fit of creditors, a				
	■ No								
	☐ Yes								
Pa	t 5: List Certain Gifts and Contribution	s							
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No								
	☐ Yes. Fill in the details for each gift.								
	Gifts with a total value of more than \$60 per person	Describe the gifts		Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift and Address:								
14.	Within 2 years before you filed for bankr	uptcy, did you give any gifts	or contributions with a tota	l value of more than \$	600 to any charity?				
	No☐ Yes. Fill in the details for each gift or c	ontribution							
	Gifts or contributions to charities that		contributed	Dates you	Value				
	more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code			contributed					
Pa	rt 6: List Certain Losses								
15.		ptcy or since you filed for b	ankruptcy, did you lose anyt	hing because of theft	, fire, other disaster				
	■ No □ Yes. Fill in the details.								
	Describe the property you lost and	Describe any insurance co	verage for the loss	Date of your	Value of property				
	how the loss occurred	Include the amount that insurance claims on line 33 of	rance has paid. List pending	loss	lost				

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Debtor 1 Sandra Dee Blunt

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Pai	tt 7: List Certain Payments or Transfers								
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.								
	□ No								
	Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and transferred	value of any prope	erty	Date payment or transfer was made	Amount of payment			
	Law Offices of Jeffrey L. Benson 3337 W. 95th Street Ste. # 2 Evergreen Park, IL 60805	Attorney Fees			4/14/16	\$1,195.00			
17.	jeffrey-benson@sbcglobal.net Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you	or to make payment			r transfer any propo	erty to anyone who			
	■ No □ Yes. Fill in the details.								
	Person Who Was Paid Address	Description and transferred	Description and value of any property transferred			Amount of payment			
	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.								
	☐ Yes. Fill in the details.								
	Person Who Received Transfer Address		property transferred paym		ny property or received or debts change	Date transfer was made			
	Person's relationship to you								
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No								
	Yes. Fill in the details.	Description and	value of the number	uti i tuan afausa	val	Data Transfer was			
	Name of trust	Description and	alue of the prope	rty transferre	ea	Date Transfer was made			
Pai	rt 8: List of Certain Financial Accounts, Insti	rumants Safa Danasi	t Boyos and Store	ago Unite					
ı a	List of Certain Financial Accounts, insti	ruments, Sale Deposi	t boxes, and store	age onits					
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.								
	■ No □ Yes. Fill in the details.								
		Last 4 digits of account number	Type of account instrument	clos	e account was sed, sold, ved, or nsferred	Last balance before closing or transfer			

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Debtor 1 Sandra Dee Blunt

21.	Do you now have, or did you have within 1 year cash, or other valuables?	before you filed for bankruptcy, ar	ny safe deposit box or other deposito	ry for securities,
	■ No □ Yes. Fill in the details.			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit or plant a storage unit or plant a storage unit or plant storage un	ace other than your home within 1	year before you filed for bankruptcy'	?
	Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Pai	rt 9: Identify Property You Hold or Control for S	Someone Else		
23.	Do you hold or control any property that someo for someone.		ry you borrowed from, are storing for	, or hold in trust
	■ No			
	Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Pai	rt 10: Give Details About Environmental Informa	ation		
or	the purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the ai regulations controlling the cleanup of these sub	r, land, soil, surface water, ground		
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		aw, whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		waste, hazardous substance, toxic s	substance,
₹ер	ort all notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred.	
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	under or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	zip Code) release of hazardous material?		
	■ No	-		
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

Page 48 of 62 Document ase number (if known) Debtor 1 Sandra Dee Blunt 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Sandra Dee Blunt Sandra Dee Blunt Signature of Debtor 2 Signature of Debtor 1 Date April 18, 2016 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 16-13181

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Filed 04/18/16

Entered 04/18/16 17:15:09

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			•	
Fill in this infor	rmation to identify you	r case:		
Debtor 1	Sandra Dee Blu	nt		
Dahtano	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
			viduals Filing Under Chap	oter 7 12/15
	ve claims secured by y			
You must file th	ever is earlier, unless	within 30 days after	not expired. You file your bankruptcy petition or by the date he time for cause. You must also send copies to	
	eople are filing togeth and date the form.	er in a joint case, bo	oth are equally responsible for supplying corre	ct information. Both debtors must
	and accurate as poss your name and case n		s needed, attach a separate sheet to this form.	On the top of any additional pages,
Part 1: List Y	our Creditors Who Ha	ve Secured Claims		
For any credi information b		Part 1 of Schedule [D: Creditors Who Have Claims Secured by Prop	erty (Official Form 106D), fill in the
Identify the c	reditor and the property	that is collateral	What do you intend to do with the property secures a debt?	that Did you claim the property as exempt on Schedule C?
				,
Creditor's :	Summer Bay		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description o	f Time Share		Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property			Retain the property and [explain]:	
securing debt	t:		avoid lien using 11 U.S.C. § 522(f)	
Creditor's \	Wells Fargo Home N	lortgage	☐ Surrender the property. ☐ Retain the property and redeem it.	□No

Part 2: List Your Unexpired Personal Property Leases

17805 Ridgewood Drive Hazel

Crest, IL 60429 Cook County

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

Describe your unexpired personal property leases

Will the lease be assumed?

Yes

Description of

securing debt:

property

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Debtor 1 Sa	ndra Dee Blunt	Case number (if known)			
l 0000"0 nomo					
Lessor's name: Description of leased			□ No		
Property:	leaseu		☐ Yes		
r roporty.			⊔ Yes		
Lessor's name			□ No		
Description of	leased		_		
Property:			☐ Yes		
Lessor's name			□ No		
Description of Property:	leased				
Property.			☐ Yes		
Lessor's name			□ No		
Description of Property:	leased				
Floperty.			☐ Yes		
Lessor's name			□ No		
Description of	leased		_		
Property:			☐ Yes		
Lessor's name			□ No		
Description of	leased		_		
Property:			☐ Yes		
Lessor's name			□ No		
Description of	leased		_		
Property:			☐ Yes		
Part 3: Sign	n Below				
	of manisms. I dealers that I have in diseased				
property that i	s subject to an unexpired lease.	my intention about any property of my estate that se	cures a debt and any personal		
X /s/ Sand	Ira Dee Blunt	X			
<i>-</i>	Dee Blunt	Signature of Debtor 2			
Signature	of Debtor 1				
Date	April 18, 2016	Date			
Date	Αριιι 10, 2010				

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	r 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-13181 Doc 1 Filed 04/18/16 Entered 04/18/16 17:15:09 Desc Main Document Page 55 of 62

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Sandra Dee Blunt		Case N	Vo	
		Debtor(s)	Chapte	7	
	DISCLOSURE OF COMP	ENSATION OF ATTO	RNEY FOR	DEBTOR(S)	
c	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 ompensation paid to me within one year before the fie rendered on behalf of the debtor(s) in contemplatio	ling of the petition in bankruptcy	, or agreed to be p	oaid to me, for services	
	For legal services, I have agreed to accept		\$	1,195.00	
	Prior to the filing of this statement I have receive	d	\$	1,195.00	
	Balance Due		\$	0.00	
2. \$_	335.00 of the filing fee has been paid.				
3. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. ■	Lhave not agreed to share the shave disclosed con-	nnangation with any other narger	unlage they are n	ambars and associates	of my law firm
J. •	I have not agreed to share the above-disclosed cor	npensation with any other person	i uniess they are it	lembers and associates	of my faw firm.
	☐ I have agreed to share the above-disclosed compecopy of the agreement, together with a list of the r				law firm. A
6. I	n return for the above-disclosed fee, I have agreed to	render legal service for all aspec	cts of the bankrupt	cy case, including:	
b. c.	 Analysis of the debtor's financial situation, and ren Preparation and filing of any petition, schedules, standard renderments. Representation of the debtor at the meeting of credit (Other provisions as needed) Negotiations with secured creditors to reaffirmation agreements and applicate 522(f)(2)(A) for avoidance of liens on he 	tatement of affairs and plan which litors and confirmation hearing, a preduce to market value; extions as needed; preparation	h may be required and any adjourned cemption planni	; hearings thereof; ng; preparation and	filing of
7. B	y agreement with the debtor(s), the above-disclosed Representation of the debtors in any of any other adversary proceeding.	fee does not include the followin	g service: licial lien avoida	ances, relief from sta	ay actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of ankruptcy proceeding.	any agreement or arrangement for	or payment to me f	or representation of the	debtor(s) in
Ap	oril 18, 2016	/s/ Jeffrey L. Ber			
Da	nte	Jeffrey L. Benso Signature of Attorn			
		Law Offices of J	effrey L. Benso	n	
		3337 W. 95th Str Ste. # 2	eet		
		Evergreen Park,			
		312-607-0048 Fa jeffrey-benson@		0	
		Name of law firm	sancylonal.Het		

United States Bankruptcy Court Northern District of Illinois

In re	Sandra Dee Blunt		Case No		
		Debtor(s)	Chapter 7		
	VE	RIFICATION OF CREDITOR M	ATRIX		
		Number of	Creditors:	60	
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.				
Date:	April 18, 2016	/s/ Sandra Dee Blunt Sandra Dee Blunt Signature of Debtor			

Abetter Door & Window 203 Glenwood Road Chicago Heights, IL 60411

Account Resolution Services 1643 North Harrison Parkway Building H, Ste. 100 Fort Lauderdale, FL 33323

Acme Continental Credit Union 13601 South Perry Avenue Riverdale, IL 60827-1655

Advocate Medical Group 701 Lee Street Des Plaines, IL 60016

Allied Collection Service 8550 Balboa Blvd. Ste. 232 Northridge, CA 91325

Allina Health
P.O. Box 77008
Minneapolis, MN 55480

Arnold Scott Harris 111 West Jackson Blvd. Ste. 400 Chicago, IL 60604

AT&T Broadband 5711 S. Western Avenue Chicago, IL 60636

Atty. Richard Snow 100 N. LaSalle Suite 510 Chicago, IL 60602

Bay Area Credit Service 1000 Abernathy Road NE Suite 185 Atlanta, GA 30328 Bell Auto Leasing, Inc. 2296 Rand Road Palatine, IL 60074

BYL Collection Services 301 Lacey Street West Chester, PA 19382

Chicago Department of Revenue Remittance Center P.O. Box 88292 Chicago, IL 60680

Chicago Tribune P.O. Box 9001157 Louisville, KY 40290

CitiFinancial P.O. Box 183172 Columbus, OH 43218

Comcast P.O. Box 173885 Denver, CO 80217

Commonwealth Finance 245 Main Street Scranton, PA 18519

Consultants in Pathology P.O. Box 3039 Charleston, SC 29417

Convergent Outsourcing, Inc. P.O. Box 9004 Renton, WA 98057

Cook County Health and Hospitals P.O. Box 70121 Chicago, IL 60673

Debt Recovery Solutions P.O. Box 9001 Westbury, NY 11590 Department of Ed/Nelnet 4150 N. Drinkwater Blvd. Ste. 200 Scottsdale, AZ 85251

Direct TV P.O. Box 78627 Phoenix, AZ 85062

Dr. Tajudeen Ogbara 9201 Calumet Avenue Munster, IN 46321

DSG Collect P.O. Box 12619 Chicago, IL 60612

Edelstien and Edelstein 3825 W. Montrose Ave. Chicago, IL 60618

Enhanced Recovery Company P.O. Box 57547 Jacksonville, FL 32241

Enhanced Recovery Company P.O. Box 57547 Jacksonville, FL 32241

Enhanced Recovery Company P.O. Box 23870 Jacksonville, FL 32241

EOS CCA 700 Longwater Norwell, MA 02081

Escallate, LLC P.O. Box 710715 Columbus, OH 43271

Franciscan Alliance, Inc. 37621 Eagle Way Chicago, IL 60678

Hanover Premium Finance P.O. Box 2243 Bridgeview, IL 60455

HHRG P.O. Box 459080 Sunrise, FL 33345

Illinois State Toll Highway Auth. 2700 Ogden Ave Downers Grove, IL 60515

Ingalls Memorial Hospital One Ingalls Drive Harvey, IL 60426

Jefferson Capital Systems, LLC 16 McLeland Road Saint Cloud, MN 56303

JVDB & Associates P.O. Box 5718 Elgin, IL 60121

Linebarger Goggan Blair & Sampson PO Box 06152 Chicago, IL 60606-0152

MCSI 7330 College Drive Palos Heights, IL 60463

MCSI 7330 College Drive Palos Heights, IL 60463

MCSI 7330 College Drive Palos Heights, IL 60463

Merchants Credit Guide Co. 223 W. Jackson Street Ste. 900 Chicago, IL 60606 Miramed Revenue Group 991 Oak Creek Drive Lombard, IL 60148

NCO Fin/90 600 Holiday Plaza Matteson, IL 60443

Radiology Imaging Consultants 9413 Eagle Way Chicago, IL 60678

Recievable Performance 10413 Beardslee Blvd. Syracuse, NY 13205

South Suburban Cardiology Assoc. P.O. Box 5858 Belfast, ME 04915

South Suburban Gastroenterology 17901 Governors HWY Ste. 208 Homewood, IL 60430

St. James Hospital & Health Center 1423 Chicago Road Chicago Heights, IL 60411

Sullivan Urgent Aid Center P.O. Box 87844 Carol Stream, IL 60188

Summer Bay 25 Town Center Blvd. Ste. C Clermont, FL 34714

Sweepstakes Clearing House 1555 Regal Row Dallas, TX 75247

T-Mobile P.O. Box 742596 Cincinnati, OH 45274 TCF Bank 800 Burr Ridge Parkway Burr Ridge, IL 60521

Trustmark Recovery Services 541 Otis Bowen Drive Munster, IN 46321

United Recovery Service 18525 Torrence Ave. Ste. C-6 Lansing, IL 60438

US Bank P.O. Box 790084 Saint Louis, MO 63179

Verizon Wireless 1515 Woodfield Road Suite 1400 Schaumburg, IL 60173

Wells Fargo Home Mortgage P.O. Box 10335 Des Moines, IA 50306